

Association Offices
8001 Excelsior Drive • Suite 200
Madison, WI 53717-1623
(608) 664-9622

Lussier Family East YMCA
711 Cottage Grove Rd
Madison, WI 53716-1115
(608) 221-1571



Lussier Family West YMCA
5515 Medical Circle
Madison, WI 53719-1285
(608) 276-6606

Northeast YMCA
1470 Don Simon Drive
Sun Prairie, WI 53590-2942
(608) 837-8221

Application for Employment

An Equal Employment Opportunity/Affirmative Action Employer

YMCA of Dane County Mission

We build strong communities through programs that promote healthy lifestyles for the spirit, mind and body.

Name _____
 Last First Middle Initial Social Security Number

Present Address _____
 Number Street City State Zip

Telephone No. () _____ Are you at least 18 years of age? Yes No Date of Birth (if under 18) _____

Email Address _____

Will you accept: Full Time Work Part Time Work
 Evening Work Week-end Work Any Shift

Position Applied for: _____
 Must be specified or application will not be considered

YMCA site preferred _____
 List days and hours available for part time work. _____

How did you learn of this opening? _____

Have you ever received any form of compensation from any
 YMCA of Dane County, Inc. location?

If hired, date you will be able to start? _____

Yes No When? _____ Where? _____
 Name/relationship of any relatives working for this YMCA

Are you legally authorized to work in the U.S.? Yes No

The YMCA of Dane County, Inc. hires only United States citizens and aliens lawfully authorized to work in the United States.

Educational Background					Office Equipment	
Type of School	Name and Address	Circle Last Completed	Graduated	Diploma, Degree Course of Study	Please list computer types and programs and/or other office equipment you are proficient in.	
High School		9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No			
College		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Post Graduate		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Business/Trade		Dates Attended	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Other Qualifying Factors
 Types of Certifications: i.e. CPR, First Aid. Proof of certification may be required prior to employment.

Type	Date Received	Expiration Date	Type	Date Received	Expiration Date
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Indicate, with dates, any other extracurricular and/or volunteer activities you have been or are now engaged in relating to the position applied for

Briefly describe what makes you feel qualified to be selected to fill the position you are applying for _____

Work History (Must be completed by all applicants. Resume not an acceptable substitution.)
Please start with most recent employment.

Are you presently employed? Yes No If yes, current work schedule _____

Dates		Position Held	Supervisor's Name, Phone Number Company Name & Address	Rate of Pay		Reason for Leaving	Type of Work You Did
From	To			Start	Finish		

If you wish to include additional information, check here and attach.

References - Professional/Personal (2 required) may include mentors, coaches, teachers, etc.

Name	Address	Phone Number	Relationship to Applicant	Business / Organization

References - Close Family/Relative (2 required) may include parents, siblings, etc.

Name	Address	Phone Number	Relationship to Applicant

Signed Personal Statement

I certify that all the information given by me in this employment application is true and correct without consequential omissions of any kind whatsoever. I understand and agree that any misrepresentation or omission of facts may render this application void, or if employed, may be cause for termination of employment with the YMCA of Dane County, Inc. I further understand and agree that the filling out of this application does not obligate the YMCA to offer me a job, or obligate me to accept a job. If hired, I understand and agree that my employment is at will and can be terminated with or without reason or notice by me or the YMCA. I understand that no YMCA representative has any authority to make any agreement to the contrary.

I fully consent to and authorize the YMCA to make inquiry and to perform reference checks concerning my prior employment, education, character, qualifications, experience and background. In addition, the YMCA may obtain a copy of my driving record if my position requires me to operate a vehicle. I understand that this statement will serve as written authorization for the YMCA to make such inquiries. In addition, I will provide a background verification form. I understand that it is the YMCA's policy to secure criminal conviction history information and that my continued employment is contingent upon an acceptable criminal history background check. I hereby waive any right to claim that any request or investigation is an invasion of my privacy since they are made with my consent. I hereby release said companies, schools or persons from all liability for any damage for providing information as specified herein.

I understand that the YMCA does not condone child abuse in any form and that the YMCA will be seeking information in my background related to child abuse. I understand that any documented allegations of past incidents of child abuse may eliminate me from further consideration for employment with the YMCA. I also understand that in the event of my employment, the YMCA will take any allegations or suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigation.

In the event of my employment by the YMCA, I will comply with all policies set forth in the personnel handbook and with other policies established by the organization.

I hereby acknowledge that I have read and understand the above statement and that I voluntarily sign this application.

Signature of Applicant _____

Date _____